PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
Effective October 1, 2003								10771-826					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTTY	OF.		THAN ENTITY	
TOTAL CLAIMS			24					RATE	FEE	7	RATE	FEE ·	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			24 minus 20=		- 4			XS 9=	<u> </u>	OR	XS18=	72	
INDEPENDENT CLAIMS			3 minus 3 =		· ò			X43=	 	OR	X86≃	1.5	
MULTIPLE DEPENDENT CLAIM PI			RESENT						+	1			
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=	<u> </u>	OR	÷290=		
West CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	OR		842	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOW	Total	.24	Minus	-24	- /	=		XS 9=		OR	X\$18=		
ME	Independent	. 3	Minus	3		= .	H	X43=		OB,	X86=	-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							115		1/1	±290=		
							ŧ	+145=		OR	TOTAL		
(Caluma 1)							į	ADDIT. FEE		OR ,	ADDIT. FEE		
AMENDMENT B		(Column 1) CLAIMS	T	(Colum	ST	(Column 3)	1 1		ADDI-	1 [-	ADDI-	
		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
MON	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	•	
ME	Independent	•	Minus	***		=	lt	X43=		OR	X86=	·	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ			Ì			
							L	+145= TOTAL		OR	+290= TOTAL		
								DDIT. FEE		OR ,	ADDIT. FEE		
		٠ ـ											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		= ·		X\$ 9=	rec		X\$18=		
	Ind pendent	•	Minus	***		=	-			OR			
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=		OR	X86=		
			+145=		OR	+290=							
~ !	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
1	he "Highest Num	mber Previously Paid ber Previously Paid	is For (Total or	SPACE is Independer	ress than 11) is the	i 3, enter "3." highest number	r tour	d in the app	ropriate box	in colu	imn 1.		